

STATE OF ARIZONA POSITION DESCRIPTION QUESTIONNAIRE

1. Position Number:	2. Official Classification Title:
3. Working Title: Customer Services Rep I	4. Work Hours and Days: Varied and flexible
5. Division: Member Services	6. Section: Field Operations Administration
7. Work Unit: KidsCare	8. Physical Work Location (Street Address) and Phone #: 920 E. Madison, Phoenix, AZ 85034 (602) 417-5437 OR Virtual Office Setting – Individual Employee's Home Address
9. Supervisor's Name, Official Title, Grade, and Phone Number: Pat Holly, Customer Svc Unit Spvr, Grade 17 (602) 417-5320	10. Will this Position Supervise / Manage? Yes / X No. <div style="text-align: center;">(Circle One) (Circle One)</div> # of Direct Reports: _____ # of Indirect Reports: _____ If position supervises/manages, the organization chart must include position number, class title and code, and grade for each employee being supervised by this position. Elaborate on authority in Section E. <i>Supervision is defined as the authority to approve sick/annual leave, recommend hiring, dismissal or discipline, assign/schedule work, complete performance evaluations, etc. See instructions for "Manager" definition.</i>

A. REQUEST TO: Establish New _____ Review _____ Uncover _____ Update Description Only _____
(Check One)

Other, Specify__Title Change

(See instructions for choices.)

Employee Initiated? Yes / No.
(Circle One)

See Personnel Rule R2-5-301.G. If yes, employee should submit through agency management. For assistance, employee should contact their agency human resources office.

B. JUSTIFICATION STATEMENT

1. Explain the events or changes that made this request necessary.

The job description of this position remains the same. However, some positions will be permitted to work from their home or an alternate work site. This type of work setting is referred to as Virtual Office. Employees working in the virtual office setting have higher productivity requirements and different reporting requirements in terms of their work.

2. Attach an organization chart clearly identifying each position's official classification title, class code, and grade. Include at least two levels of supervision above this position, this position's co-workers, and, if applicable, subordinates. If requesting a review, two (2) organization charts (current and proposed) must be attached.

- C. JOB SUMMARY** - In general terms, briefly describe the purpose of this position and for what it will be held accountable. Why does it exist?

Performs customer service representative duties in local office to include: greet the public/customers in reception area; copy documents; help customers complete the application; answer general questions in person and by telephone about Title XIX Medicaid Programs and Title XXI State Children's Health Insurance Program (KidsCare) eligibility criteria. Registers new applications, and renewals including researching DES systems and data entry from documents in Fortis to ACE or KEDS. Open, sort and prepare mail for scanning, maintain daily productivity records; operate office equipment i.e., copy machine, computer, phone, fax..

Perform any other clerical duties such as maintaining logs on faxes received and referring applications for children with serious or chronic illness to the appropriate Supervisor for expedited services; delivering premium payments and Fair Hearing Requests to Finance Department; working independently with minimal supervision subsequent to training; and providing professional and courteous treatment to internal and external customers.

This position may allow the incumbent to work from a Virtual Office work site. The work duties will remain the same as indicated in this job summary. The employee will be expected to have a higher level of productivity than the expectations of in-house employees. The specific productivity requirements will be outlined in the employee planner and evaluation (ESE).

- D. MAJOR RESPONSIBILITIES** - What are the primary functions for which this position is accountable? Using action verbs, please state what you do and why you do it. (e.g., Writes, prints, and distributes monthly newsletter to keep departmental employees informed. Observes prison inmates to ensure order is maintained.) Please do not combine dissimilar responsibilities on one line (e.g., budget preparation and staff supervision are very different functions). **Ensure the time spent does not exceed 100%.**

List primary responsibilities in increments of 5%.

	Percent Time Spent (%)
1. Responsible for accurate and timely mail processing, scanning, data entry of applications and renewals and other work as assigned.	65%
2. Performs tasks related to answering customer service inquiries received via telephone, receptionist duties, and obtaining information used by eligibility interviewers in eligibility decisions.	10%
3. Researching, analyzing, and correcting KidsCare data entry or scanning problems.	10%
4. Confering with supervisor for direction, training and help with analyzing and resolving problems in the work area.	5%
5. Compiling needed productivity and other statistical reports.	5%
6. Attend meetings in person, telephonically or live meeting – staff, departmental, weekly and monthly conferences with Supervisor, etc.	5%
INSERT ADDITIONAL ROWS or ATTACH SHEET AS NEEDED. MUST TOTAL	100%

- E. AUTHORITY** - What kinds of actions and decisions will the employee in this position be authorized to make? What kinds of actions and decisions will require clearance from the supervisor? (If box #10 on Page 1 is marked "Yes", description must elaborate on this supervisory authority.) Please be specific.

Customer service representative will make limited inquiries into various automated system databases concerning applicants and recipients and to provide general information about all federal/state funded and state only funded AHCCCS medical benefits programs and available services. They must follow AHCCCS and DES systems' usage agreements and adhere to the AHCCCS confidentiality policies and procedures. They are required to request help from a Supervisor before giving detailed information to customers or attempting to resolve complex situations.

- F. KNOWLEDGE, SKILLS, & ABILITIES (KSAs)** - What knowledge, skill and ability must the employee in this position have acquired in order to perform work satisfactorily? Please be specific. (Definitions: Knowledge is described as familiarity with something or possession of information or understanding in the mind. Skill is defined as a developed capability to perform tasks or actions effectively. A skill may be developed in a variety of manual, physical, intellectual or interpersonal activities. Ability is defined as a natural talent or acquired expertise.)

The person must have familiarity with the logic used by the computer system, various AHCCCS and DES eligibility systems and various entities that will be contributing information to the member eligibility determinations. Must have knowledge of general eligibility criteria and overall services available through AHCCCS and DES; a proficiency with computers, printers, copiers, faxes and multi-lined phones; a knowledge of basic office and clerical procedures/practices, business English, grammar, spelling and basic mathematics.

Also, must have skills to communicate verbally and in writing; to manage workload to meet deadlines; to problem solve; and act as a team leader, when assigned.

How would the KSAs you have specified ordinarily be acquired? If education or training is cited, specify subject areas and courses. (Only list degrees or certifications **if** they are required to perform the job (e.g., C.P.A., Registered Nurse, Attorney) If work experience is cited, specify type of work and time on the job required.

Most skills are developed through rehearsal, repetition, and formal and informal training sessions with Supervisor and/or training personnel. Receive on the job training in various AHCCCS and DES systems and eligibility program policy and procedures. Works with Supervisor to develop professional responses. Attend agency and State mandatory training classes per ADOA regulations.

SUPERVISOR/AUTHORIZED AGENCY REPRESENTATIVE MUST COMPLETE SECTION G.

G. ESSENTIAL JOB FUNCTIONS - What are the physical, mental and environment demands for this position? Functions identified must coincide with the description of duties and major functions for this position. The functions should focus on what is to be done and the processes traditionally used to achieve the result or produce the end results. Essential vs marginal functions should reflect fundamental requirements for this position; and with the absence of such requirements the nature, scope, level or purpose of the position would be changed.

For each of the following requirements, indicate the frequency which it occurs to this position.

C = Continuously (>66%); **F** = Frequently (34-66%); **O** = Occasionally (10-33%); **R** = Rarely (<10%) **N/A** = Not Applicable.

PHYSICAL DEMANDS	Frequency	Applicable Major Functions
Balancing	N/A	
Climbing	N/A	
Crawling	N/A	
Fine Dexterity	F	1,2
Foot Controls	N/A	
Hearing	C	2, 4, 6
Kneeling/Crouching/Bending	N/A	
Manual Dexterity	F	1, 2,
Lifting/Carrying_1-15_pounds	O	1
Pushing/Pulling_1-15_pounds	O	1
Reaching	F	1, 2
Sitting	C	1,2,3,4,5,6
Standing	O	1, 2
Talking	C	2,4,6
Twisting	N/A	
Upper Extremity Repetitive Motion	F	1, 2
Vision	C	1,2,3,4,5,6
Walking/Running short distances__X____ long distances_____	F	1, 2
Other (describe)	N/A	

NON-PHYSICAL DEMANDS	Frequency	Applicable Major Functions
Analysis/Reasoning	C	1,2,3,4,5
Communication Skills (distinguish from "talking" if additional requirement to simultaneously mentally analyze or reason and verbally express)	C	1,2,4,6
Math/Mental Computation	F	1,2,3,4,5
Reading	C	1,2,3,4,5,6
Sustained Mental Activity (Example: auditing, grant writing, composing reports, problem solving)	F	1,3,5
Writing	O	3,4,5
Other (describe)	N/A	

ENVIRONMENTAL DEMANDS	Frequency	Applicable Major Functions
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Work Alone? Yes <u> X </u> No <u> </u> 90% of time	f	1,2,3,5
Dust	N/A	
Frequent Task Changes	F	1,2,3,5
High Volume Public Contact	C	2,4
Loud Noises	N/A	
Physical Abuse/Physical Danger	N/A	
Tedious/Exacting Work	F	1,,2,3,5
Temperature Extremes	N/A	
Toxic Substances, i.e., white out, glue, cleaning chemicals, etc.	N/A	

SIGNATURE: Except for Part G, Essential Job Functions, this questionnaire should have been completed by the employee working in this position, unless the position is now vacant. If it is vacant, the supervisor of the position should complete it. If for any reason this is not possible, a person thoroughly familiar with the position may complete it on behalf of the supervisor. The signature below must be that of the person who did complete the questionnaire.

The statements I made in this questionnaire are complete and accurate, and they correctly describe the aspects of the job for which information was requested.

Print Name and Sign

Date

TO THE SUPERVISOR: In the space below, please provide any additional information that you believe will contribute to a clearer understanding of the duties performed by this position. Use additional paper if needed.

Print Name and Sign

Date

TO THE AGENCY DIRECTOR OR THE AUTHORIZED REPRESENTATIVE OF THE AGENCY DIRECTOR:

This space is reserved for your comments and certification of the contents of this document.

Comments:

I have reviewed the contents of the questionnaire, and it accurately describes this position.

Signature

Title

Date